Traveling Amusement Show Traveling Circus

Mechanical Rides, Fixed Location Indoor Circus

Name of Show or Site: _	Year:
	MECHANICAL DIDES AND AMUSEMENT DEVICES

(Include Inflatable Devices)

D' L M	Manufacturer:	3.5 6	D ( C	M ID	34.	14 :
Ride Name:	Manufacturer:	Manufacturer's Serial Number:	Date of	Mass. ID:	Maine	Maine Decal:
		Seriai Number:	Mfg:		Decal:	Decai:
					(Last	(Leave Blank)
					Year)	Blank)
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Use additional sheets as necessary.

Duplicate this form as necessary.